

1.) CORPORATION NAME:

DUE DATE: 1/31/2014

COOPER CARRY, INC.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: F1201195

KEVIN CANTLEY**625 N WASHINGTON ST STE 200****ALEXANDRIA, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000,000
PREFER	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ALEXANDRIA CITY

4.) STATE OR COUNTRY OF INCORPORATION:

GA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 191 PEACHTREE STREET NE
STE 2400

CITY/ST/ZIP: ATLANTA, GA 30303

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: KEVIN R. CANTLEY
TITLE: PRESIDENT
ADDRESS: 191 PEACHTREE STREET NE
STE 2400
CITY/ST/ZIP/CO: ATLANTA, GA 30303☒

OFFICER

☒

DIRECTOR

NAME: DAVID KITCHENS
TITLE: VICE PRESIDENT
ADDRESS: 191 PEACHTREE ST NE
SUITE 2400
CITY/ST/ZIP/CO: ATLANTA, GA 30303☒

OFFICER

☒

DIRECTOR

NAME: ROGER MILLER
TITLE: VICE PRESIDENT
ADDRESS: 191 PEACHTREE ST NE
SUITE 2400
CITY/ST/ZIP/CO: ATLANTA, GA 30303☒

OFFICER

☒

DIRECTOR

NAME: SHERRY WILSON
TITLE: VICE PRESIDENT
ADDRESS: 191 PEACHTREE ST NE
SUITE 2400
CITY/ST/ZIP/CO: ATLANTA, GA 30303☒

OFFICER

☐

DIRECTOR

NAME: JEROME M. COOPER
TITLE: COB
ADDRESS: 191 PEACHTREE STREET NE
STE 2400
CITY/ST/ZIP/CO: ATLANTA, GA 30303☒

OFFICER

☒

DIRECTOR

NAME:	EDGAR MUSE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	191 PEACHTREE ST NE		
	SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303		
NAME:	MARK KILL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	COO		
ADDRESS:	191 PEACHTREE ST NE		
	SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303		
NAME:	TIM FISH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE		
	SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303		
NAME:	GREG MILLER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE		
	SUITE		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303		
NAME:	ROBERT NEAL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE		
	SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303		
NAME:	STEVE SMITH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE		
	SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303		
NAME:	ROB UHRIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE		
	SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303		
NAME:	BEN WAUFORD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE		
	SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303		
NAME:	Sean McLendon	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 Peachtree St NE		
	Suite 2400		
CITY/ST/ZIP/CO:	Atlanta, GA 30303		
NAME:	Mark Jensen	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 Peachtree St NE		
	Suite 2400		
CITY/ST/ZIP/CO:	Atlanta, GA 30303		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ SHERRY WILSON</u>	<u>SHERRY WILSON, VICE</u>	<u>1/9/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.